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REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) LFT000 CIP1/CON1	
To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		In re Application of Konowalchuk and Konowalchuk	
		Application No. 10/021,533	Filed December 6, 2001
		For: Method for Treating an Inflammation or Lesion Caused by a Virus	
		Art Unit 1617	Examiner San-Ming Hui

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows (check time period desired):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>110.00</u>	\$ <u>55.00</u>	\$ <u>55.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>420.00</u>	\$ <u>210.00</u>	\$ <u>0</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>950.00</u>	\$ <u>475.00</u>	\$ <u>0</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,480.00</u>	\$ <u>740.00</u>	\$ <u>0</u>
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2,010.00</u>	\$ <u>1,005.00</u>	\$ <u>0</u>
<input checked="" type="checkbox"/> Applicant claims small entity status . See 37 CFR 1.27.			
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1123. I have enclosed a duplicate copy of this sheet.			

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
☒ attorney or agent of record. Registration Number 41,226
☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____

08/13/2004 CCHAU1 00000089 10021533

02 FC:2251

August 11, 2004
Date

720-406-5385

Telephone Number

Sarah J. Smith
SIGNATURE

Sarah J. Smith

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of one forms are submitted.